

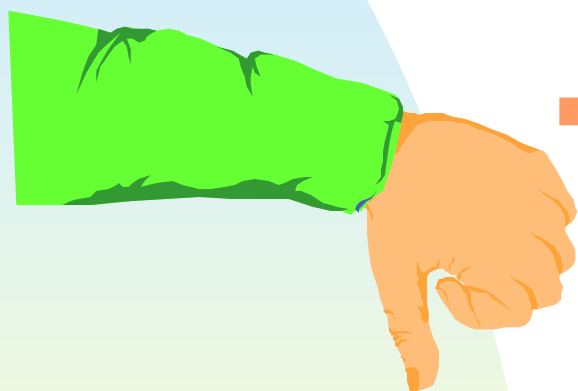
Jail Diversion in North Carolina

Developed by Bob Kurtz

Presented to the DMH/DD/SAS
Stakeholders Committee

February 25, 2004

People who are jailed for behaviors due to mental illness represent failures of our mental health system.



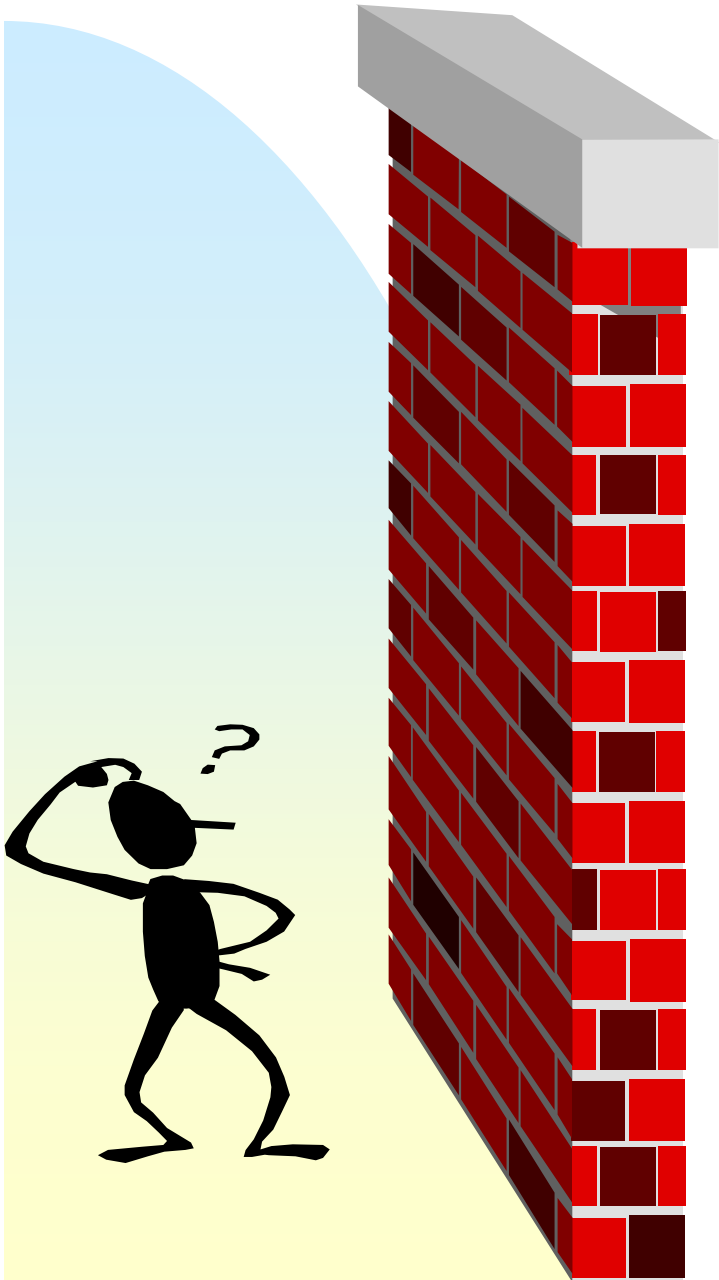
- About 1/3 of people with mental illness in jail were homeless before incarceration.
- Most received few, if any, mental health services prior to incarceration.

Have we had.....

**“treatment
resistant clients”**

or

**“client resistant”
services?**



High Rates of People with Serious Mental Illness in Jail

- Every year, about 800,000 people with severe mental illness are incarcerated in US jails.
- More than 16% of people in US jails have a serious mental illness (compared to 5% in general population).
- More than 4% of men in jail suffer from Schizophrenia or Bipolar Disorder-manic phase
- Women in jail have almost double the rate of serious mental illness as men.

People with mental illness don't fare well in the criminal justice system

- Research shows that people with mental illness -
 - ◆ **Are more likely to be arrested** - In one study, 47% vs. 26% for non-MI following police encounters.
 - ◆ **Face more serious charges** - Are often charged with more serious crimes than others for similar behavior.
 - ◆ **Stiffer sentences** - Are sentenced more severely than other people with similar crimes.

People with mental illness in the criminal justice system continued...

- ◆ **Serve longer in jail and prison** - Spend two to five times longer in jail and average 15 months more in prison.
- ◆ **Can't make bail** - Are often detained because they have no income and can't make bail.
- ◆ **Have more difficulty coping** - Experience more fights, infractions, and sanctions in prison
- ◆ **Are more vulnerable** - To being exploited or manipulated by other inmates.

In North Carolina jails.....

- No recent data available, but a 1990 DOC report found that offenders who had previous contact with the mental health system were
 - ◆ 30% more likely to be sentenced to jail than others convicted of similar crimes.
 - ◆ When charged with trespassing, were 4 times more likely to be sentenced to jail than non-MH offenders.
 - ◆ Were in jail about 25% longer (on average)
 - ◆ Were less likely to receive a pre-trial release

Goals of Jail Diversion Programs



- Preventing the inappropriate incarceration of persons with mental illness and co-occurring disorders.
- Reducing jail time for people with mental illness and/or DD who are inappropriately confined.
- Linking detainees to appropriate mental health and community services following their release from jail.

The Mission of Jail Diversion Programs:

"To divert people with mental illness or co-occurring mental illness and substance abuse problems and/or developmental disabilities from the criminal justice system through the mh/dd/sas system into the treatment, services, and/or supports they need to live successfully in the community."



Jail Diversion is not discharge planning or in-jail treatment

- **Jail Diversion:** Is a special program designed to help people with mental illness move from the criminal justice system to appropriate treatment in the mental health system.
 - In contrast -
- **Discharge / Transition Planning:** Is part of the usual criminal justice process that occurs when the offender would ordinarily leave jail.

What do jail diversion staff do?

- **Screen** - detainees in contact with the criminal justice system for the presence of a mental illness.
- **Negotiate** - with law enforcement, prosecutors, defense attorneys, and the court to develop community-based mental health treatment dispositions for clients as alternatives to incarceration.
- **Link** - clients to community based mental health services, once the mental health disposition is determined and agreed on by all parties.



Two Categories Of Jail Diversion Initiatives

- **Pre-booking** - Provide community based alternatives to arrest and incarceration. Most include a 24 hour crisis unit with a no refusal policy for law enforcement.
- **Post-booking** - Following arrest and with the agreement of the court, involvement in treatment in the community.

Models of Pre-booking Initiatives

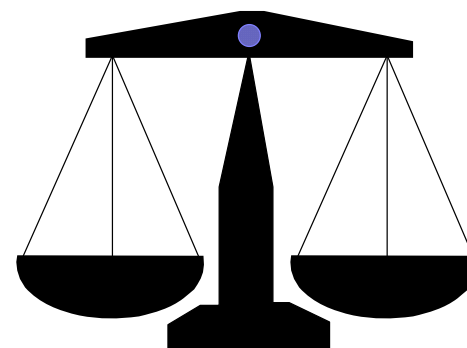
- **Memphis Crisis Intervention Team (CIT) Model:**
 - ◆ Uses officers trained to assess and respond to people with mental illness. They transport people with MI to a designated psychiatric crisis center that provides a quick turnaround for officers.
- **Birmingham Model:**
 - ◆ Mental health professionals (not sworn officers) are employed by the police to provide on-site and telephone consultations to officers in the field.

Models of Post-Booking Initiatives

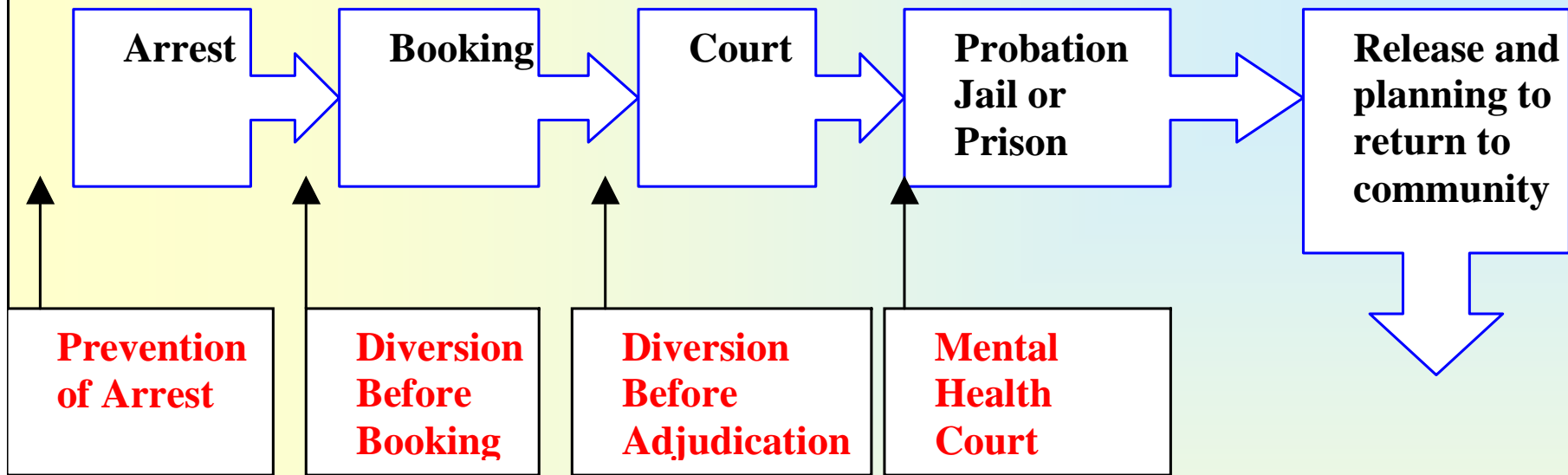
- Assertive Community Treatment Team (ACTT) model
- Intensive Case Management Model
- TASC Care Management Model.
- Mental Health Courts.

Mental Health Courts

- Are evolving rapidly
- As yet, no evidence based conclusions
- Steadman* recommends
 - ◆ A single court docket
 - ◆ Courtroom team approach
 - ◆ Specific plan manager
 - ◆ Assurance of treatment slots
 - ◆ Expanded services to avoid displacing others in need of treatment (I.e., earmark services for the court so other clients aren't pushed out of service).
 - *Hank Steadman, Ph.D., Director of Policy Research Associates and the TAPA Center, providing technical assistance to SAMHSA funded jail diversion programs*



Where Diversion Can Occur

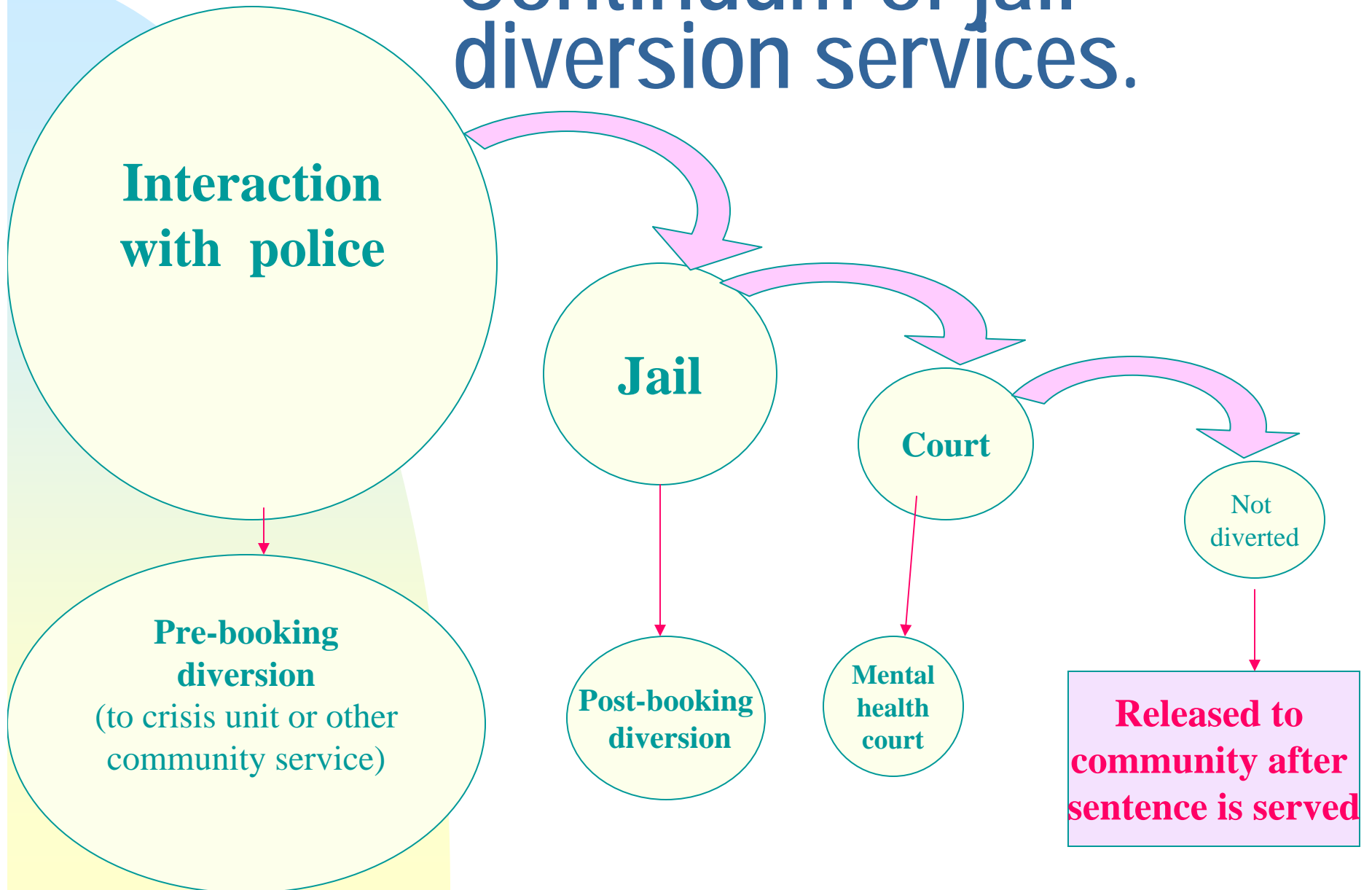


Violation of Rights

Cost Effectiveness of Intervention

The earlier the diversion is in the criminal justice process, the better!

Continuum of jail diversion services.



Core Conceptual Model

(Outcomes for jail diversion depend on a comprehensive mental health service system, and clients being effectively linked to that system)

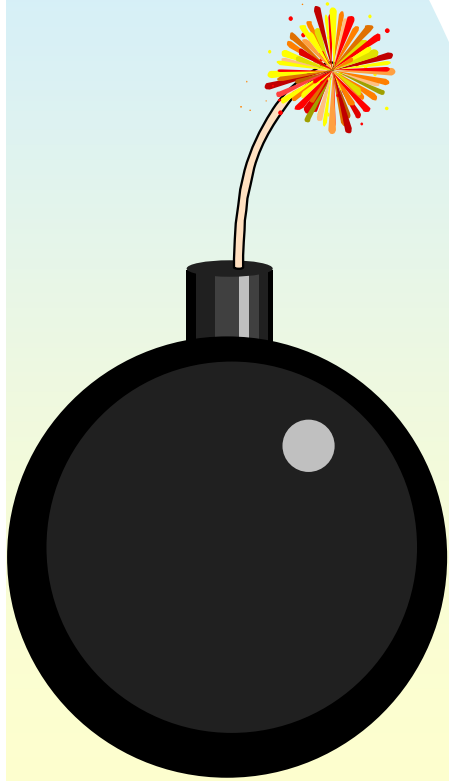


Divert from jail to???????

“Successful jail diversion efforts require more than simply diverting an individual with mental illness away from jail. He or she must also be diverted into appropriate and adequate treatment services.”

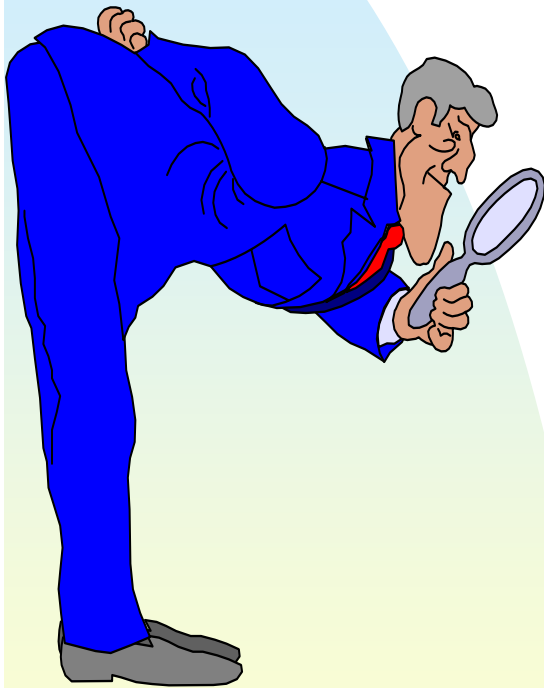


Jail diversion requires a comprehensive, responsible, and accountable mental health system!



“Poorly organized jail diversion programs lacking a mental health infrastructure produce short-term results that may harm the client and community.”

Evidence Based Practices*



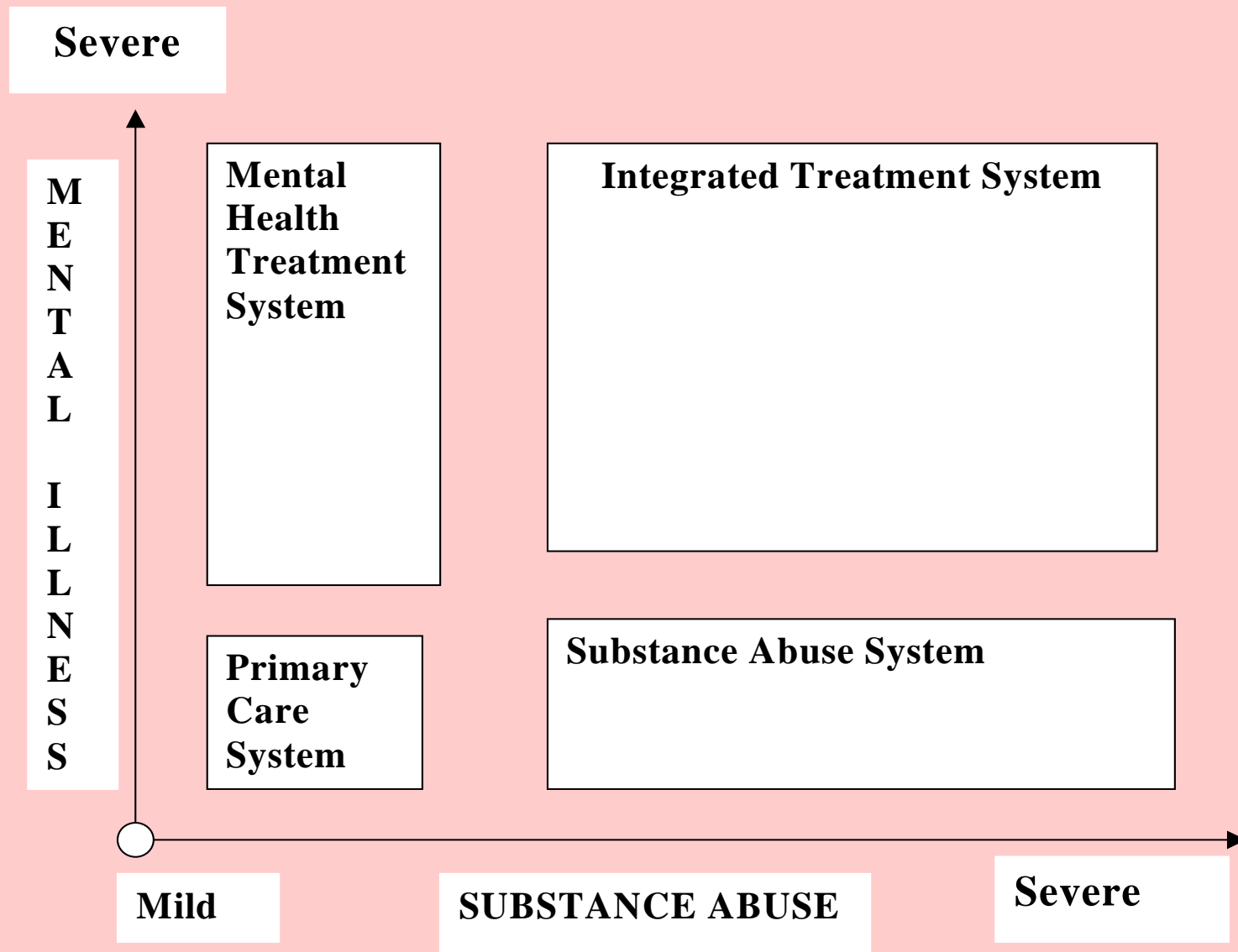
- ACT teams
- Medication Mgt. Algorithms
- Integrated Services for Co-occurring disorders
- Supported Employment
- Family Psycho-education
- Illness Self-management
- **Robert Wood Johnson Foundation*

Integrated Treatment for People with co-occurring mental illness and substance abuse is particularly important for Jail Diversion clients.

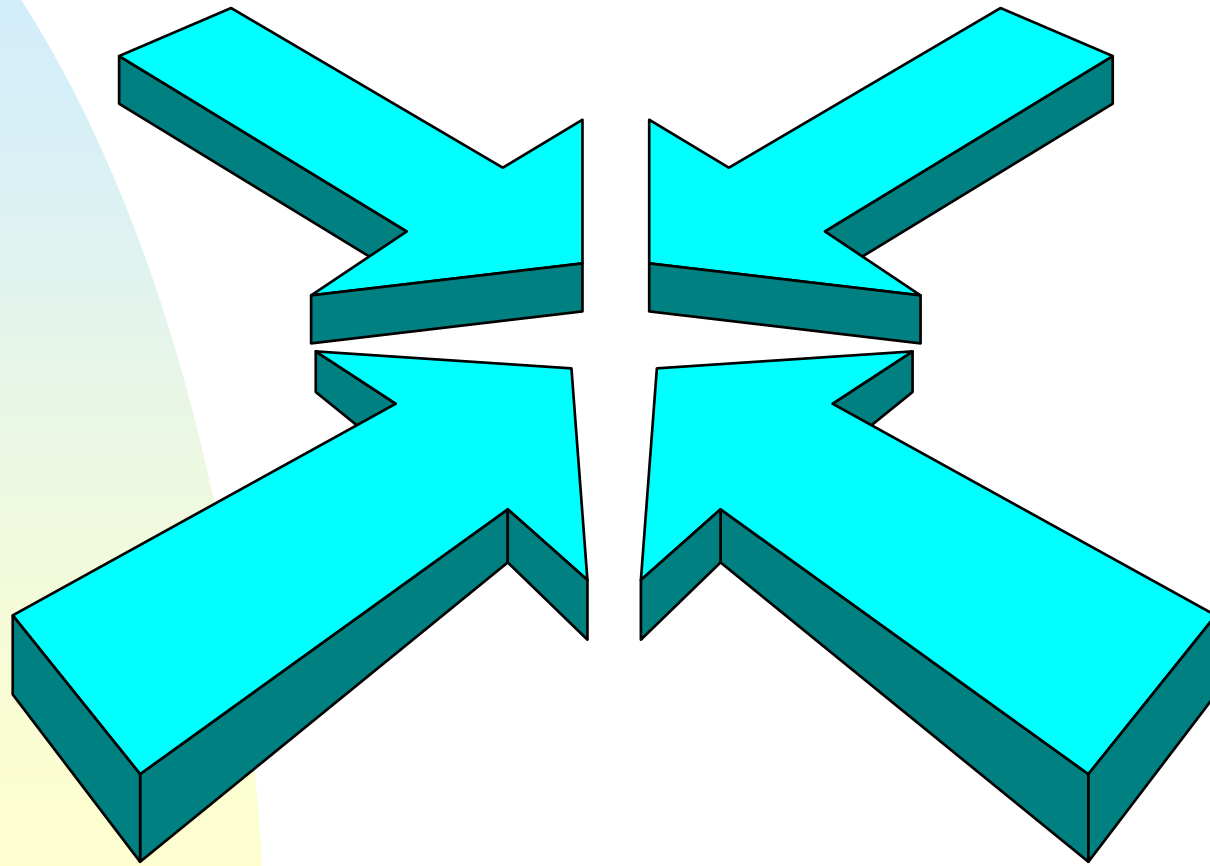
- More than 72% of people with severe mental illness who are in jail have a co-occurring substance abuse disorder.



WHERE TREATMENT SHOULD OCCUR FOR PEOPLE WITH CO-OCCURRING MENTAL HEALTH & SUBSTANCE ABUSE PROBLEMS



Collaboration
between Mental Health &
Justice Systems is complicated by their
differences





Different Interests

- Mental Health Providers: Concerned with client's emotional and psychiatric well being.
- Jail: Concerned with safety. Group vs. Individual focus.
- Defense Attorney: Often concerned with short term legal (instead of long term “best”) interests of client.
- Judges: Concerned with community safety

Different Constituencies

■ Actor

- Police-----
- Prosecutor-----
- Defense Attorney-----
- Judge-----
- Sheriff-----
- Mental Health staff-----

■ Constituency

- Local Community
- Government
- Defendant
- The Law (and electorate)
- The wider community and sometimes federal judge
- The client, family, advocates, local community, and state.

DIFFERENT LANGUAGE

-including different definitions of **diversion***

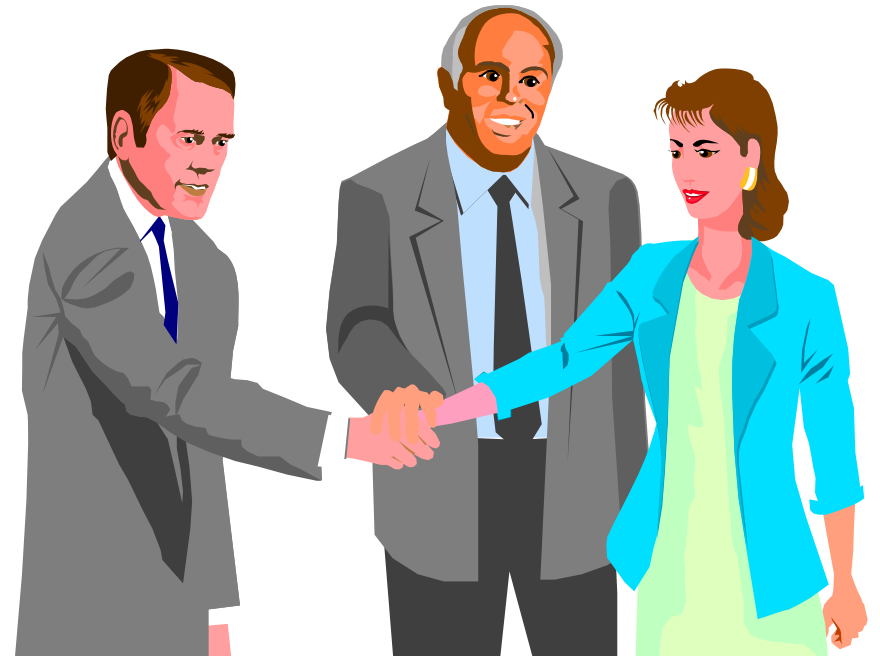
Justice system definition of diversion: *To divert the criminal case out of the justice system and off the court docket. Judge's may view this type of diversion as a criminal's attempt to "get out of jail free."*

Mental health system definition of diversion: *To divert the client from jail to the community mental health system. Deferred prosecution, continued court oversight, and (perhaps) mandatory treatment are included in this definition.*

**To a judge, deferred prosecution is not diversion.*

So how do we resolve these differences????

- Some promising practices have been developed between mental health systems and justice systems.



Promising Practices.....

- **Establish MOU's or MOA's between agencies.**
- **Cross train staff** (law enforcement & mental health can train each other).
- **Establish specialized case loads** (for probation officers and others).
- **Establish rules and consequences**, but not “all or nothing” consequences.
- **Partner with probation / parole when appropriate** (i.e., joint home visits, communication about risky behavior, etc.)
- **Get authorization to release information**, or don't accept client into program.

Overcoming Barriers: To Judge's Participation in Jail Diversion

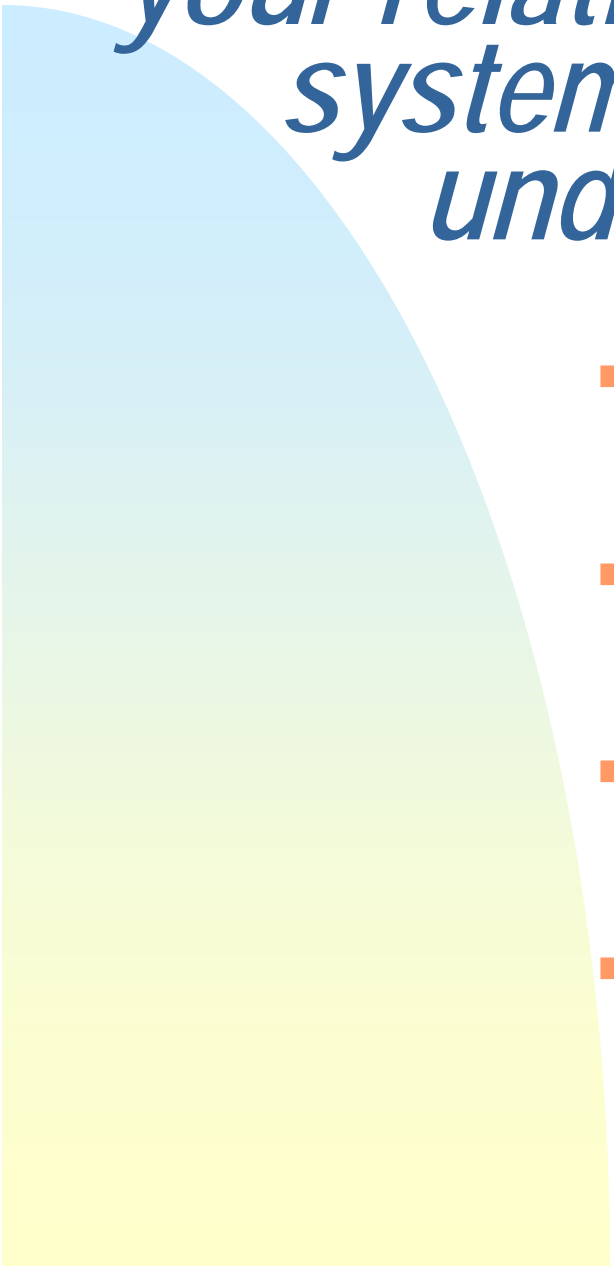
- Barrier: Judge's won't use the program for fear for the public's safety.
 - ◆ Over communicate, briefly and in writing. Keep the judge informed through frequent notes.
 - ◆ Stress scrutiny as much as service or treatment.
 - ◆ Build your reputation by picking your first clients carefully.

Overcoming Barriers: To Police Participation in Jail Diversion

- Make it easier than taking the person to jail (for pre-booking diversion programs).
- Reduce waiting times (for law enforcement).
- Train law enforcement officers.
- Give 'em feedback re: outcomes - share successes.
- *“Above all, don’t let the client beat the police back to the corner.”*

Overcoming Barriers: To Consumers Participation in Jail Diversion

- “If you help them they will come.”
- Get to know them. Make them feel welcome.
- Understand the culture of the jail.
- Ask them what they want.
- Find out what they’ll need to succeed outside of jail, and how you can offer that to them.
- Understand that they may be doing the best they can with what they’ve got.
- If jail time is short, realize you may not be offering a less punitive alternative.



“The most effective way to improve your relationship with the justice system is to increase your understanding of it.”

- Learn the “language” of the justice system
- Know how the justice system functions in your community
- Understand the culture of your law enforcement officers and jails.
- Beware of the many challenges faced by those working in the justice system.

Notable Quotes

“The criminal justice system is an assembly line. There are huge numbers of people to process and its easy to miss people with mental illness.” -- a sheriff.

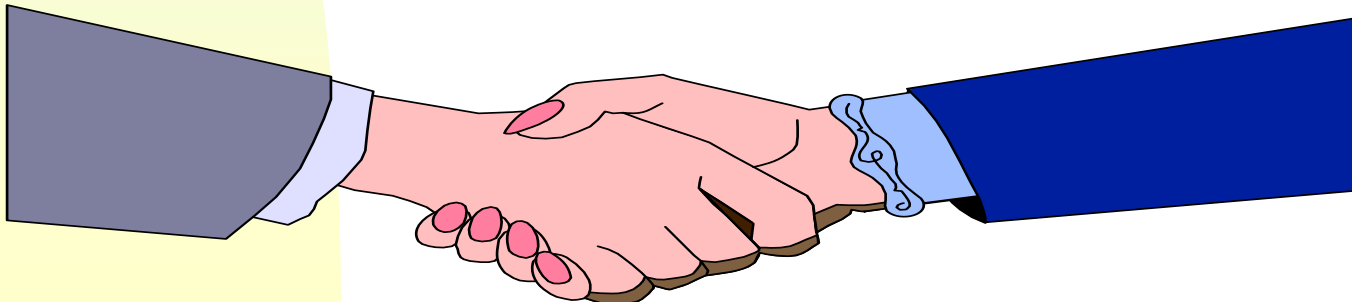
“Every time you have a new program, it taxes the system. Small scale programs may not be worth it.” -- a judge.

More Notable Quotes

“Put the sheriff and police chief on your advisory committee. If you don’t have one, make an advisory committee so you can have them on it.” - Advice provided by technical assistant expert for Jail Diversion.

The Benefits of Working Together

- Reduce jail days, reduces overcrowding, reduces overcrowded court dockets.
- Reduces jail service expenses.
- Reconnects people to services.
- Coordinates services - reduces waste.
- Gives people structure, allowing them to focus on recovery.
- Increases Federal share of treatment cost.





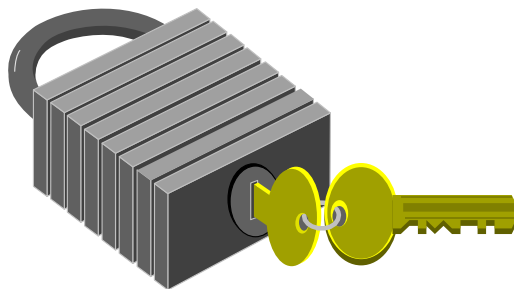
Cost Savings for Jail Diversion

"Cost savings from jail diversion are not realized until 18 months into the program."

"There are more cost savings for diverting felons than misdemeanants."

The Nathaniel Project in New York

A jail diversion program designed to divert felons with mental illness from the criminal justice system, using an ACT team approach.



Nathaniel Project (NYC)

Outcome Measures (N = 53)

	<u>Prior Year</u>	<u>Current Year</u>
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Number of Arrests

Misdemeanors-----	35	5
Felonies-----	<u>66</u>	<u>2</u>
Totals-----	101	7

	<u>Intake</u>	<u>One Year</u>
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Housed-----	10%	79%
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Retention at 6 months - 88% Retention at two years - 80%

The President's New Freedom Commission on Mental Health (2003)

“The Commission recommends widely adopting adult criminal justice and juvenile justice diversion and re-entry strategies to avoid the unnecessary criminalization and extended incarceration of non-violent adult and juvenile offenders with mental illness.”

Mentally Ill Offender Treatment and Crime Reduction Act of 2003

- Introduced by Sen. DeWine (R-Ohio) with bipartisan support
- Authorizes \$100 million for two years
- Grant funds for
 - Court-based initiatives
 - Training for mental health & Criminal Justice
 - Transition programs
- Charges Att.Gen. And HHS Sec to establish an Interagency Task Force

N.C.'s Jail Diversion Program

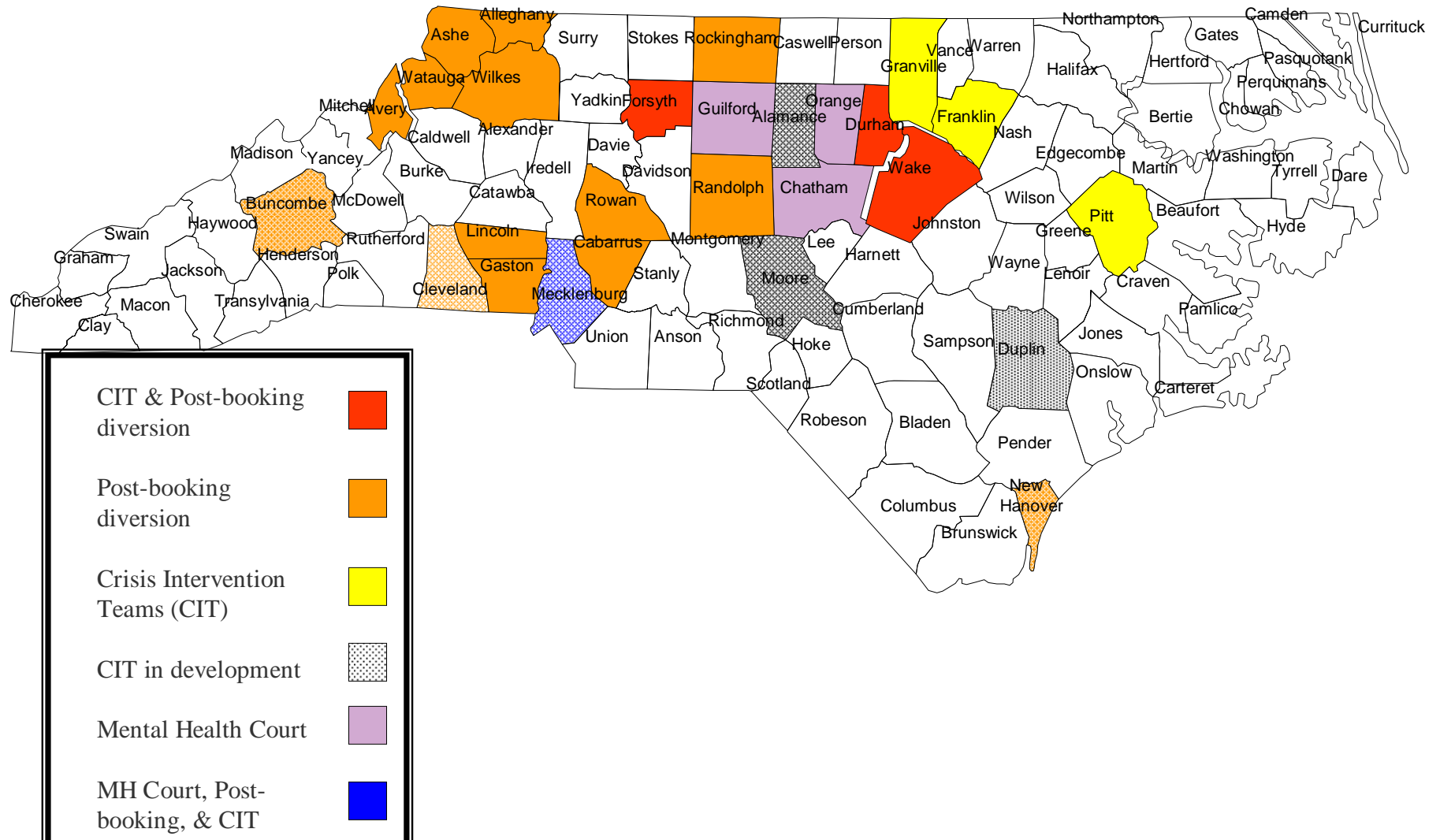
\$\$\$\$\$\$\$\$ Funding \$\$\$\$\$\$\$\$

- Twelve area programs receive continuation funds to implement a jail diversion initiative.
- Amounts range from \$50,000 to \$64,000 per area program per year.
- Total funding FY 02-03: \$714,042

NC Jail Diversion Programs

- ◆ Blue Ridge Area Program
- ◆ Pathways Area Program
- ◆ Piedmont Area Program
- ◆ New River Area Program
- ◆ OPC Area Program
- ◆ Centerpoint Area Program
- ◆ Guilford Area Program
- ◆ Mecklenburg Area Program
- ◆ Rockingham Area Program
- ◆ Randolph Area Program
- ◆ VGFW Area Program
- ◆ Southeastern Area Program

Jail Diversion Programs in North Carolina Counties



For More Information about Jail Diversion

- The Tapa Center is the organization contracted by SAMSHA to provide technical assistance to jail diversion programs. Contact them at: www.tapacenter.org or (866) 518-8272
- The GAINS Center is a national organization that collects and disseminates information about effective services for people with co-occurring disorders in contact with the justice system. Access them at: www.gainsctr.com
- The Consensus Project is an national effort to provide information, research and support to organizations attempting to help people with mental illness in the criminal justice system. It is sponsored by the Council of State Governments. They may be reached and their report downloaded at: www.consensusproject.org